DATE								
	Sep 17, 1999	A - R -	T - E	~ X	BALTIMORE, MI			
J08 #	21639	FINE ART	SERVI	CES	(419) 242-9200			
DEPT.		8712 Spectrum Drive	Landover, MD	20785-4761	NEW YORK, NY			
AUTH.	halto-as	(301) 350 - 5500	FAX (301)	350 - 5505	(212) 244-0998			
CALLER	Kathy Erikson	STANDARD BILL OF L			WASHINGTON, DI (301) 350-5500			
SHIPPER:	Federal Building 29th & 3rd Avenue Brooklyn, NY		CONSIGNEE: 28	A - Warehouse 00 Eastern Blvd. ddie River, MD 21220				
	Elzena Huffman	718-340-5268	Al	Smink F	Pgr: 888-457-3654			
PICK-UP:	Mon, Sep 20, 1999		DELIVERY: Tue	e, Sep 21, 1999				
BILLING IN	FORMATION:	AMOUNT	INSURED BY:					
Acco		CHECK #	CONDITIONS AT PICK-L	then Artex IP;				
	Heartland Finance Ctr P85310993	6BCP DATE CASH		PACKED BY SHIPPER; CONTENTS	g. PANATTANIO INNUMBER			
ACCOUNT		500	Twe lanten perna	PLYOUR BE SHILLY CHILDIS	CE SOUTHING CHENTURIS			
# OF PIECES	ITEM DESCRIPTION ARTIST		8IZE	CONDITION				
	SPECIAL INSTRUCT	TIONS:						
	SPECIAL INSTRUCT	TIONS:						
	For PU	TIONS:						
RFLEASED	FOR DO SHIPPER HEREBY AUTHORIZES THIS BHIPPINE	IT AND ACREED TO ALL TERMS AND CONDITIONS HER	EN. PICKED UP CARRIER AGRE	EN TO TERMAS AND CONDITIONS HEREIN.				
	FOR DO SHIPPER HEREBY AUTHORIZES THIS BHIPPINE		IN PICKED UP CARRER AGRE BY (b) (6)	EN TO TERMS AND COMMITTIONS HEREIN.				
ВУ	FOR DO SHIPPER HEREBY AUTHORIZES THIS BHIPPINE	IT AND ACREED TO ALL TERMS AND CONDITIONS HER	(b) (6)		DATE: 9/2/20			
BY BHIPPER	FOR PU FOR DO SHOPPER HERCEY AUTHORIZES THIS EMPPARE IF NO VALUE IS DECLARED ABOVE, CARRIER'S	nt and agreer to all terres and conditions her Claubility shall be limited to 8.80 per pound. DATE:	BY (b) (6) ARTEX WRAPPING MATERIAL USED:	TYVEK CRIMA CART	TON LABOR:			
RELEASED BY SHIPPER RECEIVED	FOR DO SHIPPER HEREBY AUTHORIZES THIS BHIPPINE	IT AND AGREER TO ALL TERMS AND CONDITIONS HER LIABBILITY SHALL BE LIMITED TO 8.80 PER POUND. DATE: INDITION EXCEPT AS NOTED	BY (b) (6) ARTEX		TON LABOR:			
BY 8HIPPER	FOR PU FOR FIX SHIPPER HEREBY AUTHORIZES THIS EMPAGE IF NO VALUE IS DECLARED ABOVE, CARRIER'S RECEIVED THE ABOVE PROPERTY IN GOOD CO AND AGREE TO ALL TERMS AND CONDITIONS (b) (6)	IT AND AGREER TO ALL TERMS AND CONDITIONS HER LIABBILITY SHALL BE LIMITED TO 8.80 PER POUND. DATE: INDITION EXCEPT AS NOTED	BY ARTEX WRAPPING MATERIAL USED: PLASTIC	TYVEN CHUNA CANT	TON LABOR:			



HUTCHINSON INTERNATIONAL CORP. T/A UNITED RIGGING

A Woman-Owned Minority Company
6601 AMMENDALE ROAD - BELTSVILLE, MD 20705

301-937-8510 410-792-2538 800-638-0578 FAX 301-937-8241

DAY: THURS DATE: TUNE 23,2005

37414

	FACILITY
PROM: MIDDLE RIVER DEPUT TO: G.S. A. FINE ARTS STORED (6) (5)	
MIDDLE KIVER UND. ALEX VA.	Sales Island
SEE: GENGE FARMER (410)967-9360 ST: ALICIA WEBER ZO	2)5,1-1554
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CUSTOMER: G.S.A. PO#GS-CAP-CS (4M-0136
ADDRESS: PHONE #:	A comment of the comm
CITY & STATE:	1016 128 10
ATTENTION:	ques
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	AND ALL OF THE REAL PROPERTY.



HUTCHINSON INTERNATIONAL CORP. T/A UNITED RIGGING

A Woman-Owned Minority Company
6601 AMMENDALE ROAD • BELTSVILLE, MD 20705

301-937-8510 410-792-2538 800-638-0578 FAX 301-937-8241

DAY: THUNS. DATE: JINE 23, 2005

37415

FROM: UNITED RISEINS (b) (5)	2		T. M.	FG. FACILITY
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HUTCHINSON INTERNATIONAL CORP. T/A UNITED RIGGING

A Woman-Owned Minority Company
6601 AMMENDALE ROAD • BELTSVILLE, MD 20705

DAY: FROM: DATE: JUNE 24 2005

37416

301-937-8510 410-792-2538

RIGGING	TO GSA	FIN	E FIRTS	SiG PACILI
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TREK Control No: CAFP99-0643

ORDER	FOR SU	JPPLIES AND	SERVICES		IMPORTANT: See Instructions in GSAR 553.370-300-1 for distribution.			PAGE	OF P	AGES
1. DATE OF ORDER 08/11/99		2. ORDER NUMBER OPEN MARKE	T		TRACT NUMBER)		T NUMI 85310		_
2017	Т	5. ACCOU	INTING CLASSIFICATION	٧.	v= 2		6. FINANC	E DIVISI	ON	
FOR	FUND 192.X	POOYOOO4	BIA CODE 61	0/C CO 25	DE	AC			NDOR NUMBER	-
GOVERNMENT USE ONLY	FUNC CODE 901	C/E CODE 516	PROJ /PROS. NO	CC-A		MDL	FI	G/L	DEBIT	
C II I	W/ITEM	CC-B	PRT/CRFT		Al		rc	DIS	SCOUNT	
7. TO: CONTRACTOR (N	eme, address and	d zip code)			. 71 34	8. TYPE OF C	ORDER		REFERENCE YOUR	
ARTEX 1613 KNECHT BALTIMORE, M 410 242-9200	AVENUE	+41				X A. PURCHASE 7/12/99 QTE Please furnish the following on the terms specified on both of the order and the attached sheets, if any, including delive indicated.				
ATTN: AL SMI	NK					B. DELIVERY This delivery order is subject to instructions contained on the only of this form and is issued subject to the terms and conform the above numbered contract.				
						C. MODIFICA			AUTHORITY FOR ISSUI	NG
					ECK IF APPROP.		Except as provided herein, all terms and conditions of order, as heretofore modified, remain unchanged.			
10A. CLASSIFICATION		B. OTHER THAN	C. SMALL	D, SM/	ALL	108. TYPE O	F BUSINESS			
X A. SMAL	:5L	SMALL BUS-	DISADVAN- TAGED	OWNE	0	X A. COR		SHIP	C. SOL	IETOR
GSA/PROCUREN 18TH & F STS., WASHINGTON, 202 501-2769	MENT SVCS NW RM B-2	BR.	12. REMITTANCE ADDR ARTEX 8712 SPECTRU LANDOVER, MI	IM DRIVE		GSA, C HISTRI 1800 F ATTN: WASHI	IIP TO (Consignee address, zip code and telephone no SA, COE PNH STRIC BUILDINGS/ARTS 100 F STREET, NW ITN: ALICIA WEBER ASHINGTON, DC 20405 2-501-1554			
14. PLACE OF INSPECTION				17.1	WEBER PNH 2		ymbol and telephone no.)			
18. F.O.B. POINT Destination	W 1.00		17. GOVERNMENT B/L N	IO.	18. DELIVERY F.	O.B. POINT ON	O.B. POINT ON OR 19. PAYMENT/DISCOUNT TO Net 30			
			20.	SCHEDULE	= 110,60					->/-
ITEM NO.		SUPF	PLIES OR SERVICES		QUANTIT ORDERE (C)		UNIT PE	RICE	AMOUNT (F)	
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21. RECEIVING OFFICE (N A. WEBER PNH 2							TOTAL FROM 300-A(s)			
22. SHIPPING POINT			23. GROS	SS SHIP WT.		100	GRAND TOTAL		\$36,100.00	Y
24. MAIL INVOICE TO: (In General Services Administr GSA, Heartland F	ration (FUND)	6900		A, Heartland F		_		7	258. TELEPHONE NO. 817-978-2408	
P.O. Box 419279 Kansas City, MO	}	OBCF		ME OF CONTRACTI erman E. Farve		ICER (Type)			268. TELEPHONE NO. 202 501-2769	
			26C. SIG							

						TREK		lo: CAFP99-	0643
ORDER F	OR SUPPLIES A	ND SERVICES - F	RECEIVIN	NG REPO	ORT		PAGE 1	oF 1	PAGE
1. DATE OF ORDER 08/11/99	2. ORDER NUMBER OPEN MARKE	T .	3. CONTRACT NUMBER GSOOC99AM0250			NUMBER 5310993	3		
IMPORTANT			<u>'</u>			<u> </u>			
This form must be re	eceived in the payment o	office within 5 workdays	of acceptanc	e.					
 Acceptance must ta stated in the contract 		ar days of delivery or con	npletion of w	ork unless	a differer	nt inspection	n/accepta	ance period is	•
 Invoices received m 	ust be time stamped to i	ndicate the date of receip	t. See rever	se of this fo	orm for d	etailed instr	uctions.		
7. TO: CONTRACTOR (Name, ac	dress and zip code)		111		TYPE OF	DRDER	REFE	RENCE YOUR	—-··-
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ITEM NO.	SUPE	20. SCHI	EDULE	QUANTITY	UNIT	UNIT PRI	ce l	AMOUNT	
(A)	33	(B)		ORDERED (C)	(D)	(E)	-	(F)	
I certify that the above supplies and/or services have been:	TRANSPORT SERRA FROM STORAGE FA THE ATTACH: JULY 12, 199 NOTIFY ALIC! 202-501-155 "TILTED ARC' AND DETAILS	RTIFICATION OF REC	HARD DLE RIVER NCE WITH R DATED HALL ATION OF		Ea	\$36,100	c.	\$36,100.00	
received on (Date)	NAME AND TITLE (Type, print	or stamp)					OFFICE SYN	/BOL	
							TELEPHONE	NO.	
and accepted on (Date)	SIGNATURE						DATE SIGNI	ÉD	
CENERAL CERVICES	ADMINISTRATION	E DECENIA	NC DEDORT	DAVIAIO (DECICE		A COD: 1	200 /05// 2	201

ATTENTION!!! ATTENTION!!! ATTENTION!!!

FUNDS MANAGER:

ATTACHED ARE YOUR COPIES OF THE GSA FORM 300.

PLEASE FORWARD THE RECEIVING REPORT TO THE APPROPRIATE PROGRAM OFFICE TO BE COMPLETED UPON RECEIPT OF THE ITEMS AND/OR SERVICES.

IMPORTANT: A COPY OF THIS RECEIVING REPORT SHOULD ALSO BE FORWARDED TO THE PROCUREMENT SERVICES BRANCH (CAFP) IN ROOM B-242. THIS COPY IS REQUIRED TO CLOSE OUT OUR PROCUREMENT FILES IN ACCORDANCE WITH THE FEDERAL ACQUISITION REGULATIONS (FAR) 4.804-1.

YOUR COOPERATION IS APPRECIATED.

General Services Administration 819 Taylor Street P.O. Box 17181 Ft Worth, TX 76102 Phone Number (817) 978-2408 FAX NUMBER (817) 978-7413

RECEIVING REPORT REQUEST

Day	: 85310993 Dice: 21639 S Old: 10/08/1999 Chase Order:	Contract Numb	er: GS00C99AM0250	
T	ONTACT NAME: RENEE ELEPHONE NUMBER: 2 ATE RECEIVED: 10/08	02-501-6403	OFFICE SYMBOL: PX	-
	The Document(s) re	quested have been ate). Transmittal received are unsa	forwarded to Finandate tisfactory or damage	ce
	the GSA Form 3025	Receiving Report	cepted in substitut for reasons specifi	
	Signature Maximum Payment Am Less Deduction(s)		Date , ect.	W
	I certiy that the received on 7.2	above goods and/or	services have been	

	REQUISITIO	N/PROCUREN	ENT REC	QUEST	T FOR EQUI	MENT	,		PAGE	OF	
2. REGUESTION /P REQUEST NO.	SUPPLI	ES OR SERVI	CES (Inst	ructioi	ns on revers	8)	4. D	ATE PREPARED	5. JOB/	PROJECT NU	PAGES
REQUEST NO.			3109	193			1	07/14/99	- 1 '		
Artex/	' /C / \	end Location)	4F		7. FROM (Requisitioning office, Name, Symbol, Location and Telephone Number) Historic Buildings & the Arts COE-1 202-501-0887					'NH	
	ON CALL (Name and Telleber (202)				9. RECEIVING OFFI Alicia 1			Telephone Numbe	er)		
	10. ACCOUNT	ING CLASSIFICAT			11. SHIP TO (Addi	ess, ZIP Cod	ie and Tele	phone Number)			
192.x	ORG. CODE	B/A CODE	0/C CODE 25								
FUNC CODE	POOYOOO4	PROJ/PROS. NO.	CCA CCA								
901	516	Phos/Phos. No.									
W/ITEM	CC-B	PRT/CRFT		$\neg \dagger$	12. CONTRACT NU	MBER					
ITEM NO.		DESCRIPTION	ON OF ARTIC	CLES OR	SERVICES	QUAN- TITY	UNIT OF	UNIT PRICE		AMOUN	т
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Renee Bal	dwin			Alic	cia Weber	: <u> </u>					
20ь, Signature b) (6)		1/2	23/99		PED NAME OF APP					7. /4	1.99
				² (b) (6	6)				-	DATE Z. /	— 5.97
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